

**REGISTRATION FORM**  
**9<sup>th</sup> Advanced Accelerator Concepts Workshop**  
**Hilton of Santa Fe, Santa Fe, NM, USA**  
**June 10-16, 2000**

**PLEASE TYPE OR PRINT LEGIBLY**

Name: (Last, First, Middle) \_\_\_\_\_

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Citizenship: \_\_\_\_\_

**WORKSHOP COSTS:**

**(Includes general workshop expenses, breakfasts, lunches, receptions and banquet)**

Registration fee: \$495.00

**(Registrations will not be accepted after May 5<sup>th</sup>)**

**PLEASE INDICATE PARTICIPATION:**

Registration/reception, Saturday, June 10, 2000: ☐ Yes ☐ No

Breakfast, Sunday ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐  
(June 11-16, 2000)

Lunch, Sunday ☐ Monday ☐ Wednesday ☐ Thursday ☐  
(June 11, 12, 14, 15, 2000)

Reception, Indian Arts and Cultural Museum, Sunday, June 11, 2000: ☐ Yes ☐ No

Reception, Southwest Contemporary Gallery, Monday, June 12, 2000: ☐ Yes ☐ No

Banquet, Wednesday, June 14, 2000: ☐ Yes ☐ No

Special Dietary Requirements: \_\_\_\_\_

Make check payable in US dollars to **AAC 2000 Workshop**

Credit Cards will be accepted (**Visa and MasterCard only**)

**Your credit card will be processed one-two weeks prior to the conference. You will receive a receipt at the conference registration desk.**

Credit Card (please circle one): Visa    MasterCard

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Amount Submitted

Registration \$495

Guests \_\_\_\_\_

Total \_\_\_\_\_

**REGISTRATION FORM MUST BE RECEIVED BY MAY 5, 2000**

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